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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)							Application Number <u>09/661,893</u>		Filing Date _____	
Applicant(s) _____							May be used for additional claims or amendments			
CLAIMS	AS FILED <u>9-14-00</u>		AFTER FIRST AMENDMENT <u>4-3-02</u>		AFTER SECOND AMENDMENT <u>5-29-03</u>					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	1									
Total Depend	7									
Total Claims	8									
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Total Indep										
Total Depend										
Total Claims										

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/661,693 FILING DATE

APPLICANT(S)

5-29-03 CLAIMS

5-29-05

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101						1
102						1
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TOTAL IND.		↓		↓	4	↓
TOTAL DEP.		←		←	32	←
TOTAL CLAIMS					36	

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)						Application Number <div style="font-size: 1.2em; font-family: cursive;">09/661,693</div>		Filing Date		
						Applicant(s)				
* May be used for additional claims or amendments										
CLAIMS	7-5-05 AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		7-5-05			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	
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Total Indep										
Total Depend										
Total Claims										

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**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/667,693 FILING DATE

CLAIMS

	AS FILED 7-5-05		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
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TOTAL IND.	2	↓		↓		↓
TOTAL DEP.	16	←		←		←
TOTAL CLAIMS	18					

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

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